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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/554,592
Confirmation Number	
Filing Date	with an effective filing date of March 26, 2004
First Named Inventor	Stephen Michael KUESTER
Group Art Unit	3636
Examiner Name	Milton NELSON Jr. Fax: (571) 273-8300
Total No. of Pages in this Submission: 9	Attorney Docket Number COLGRA P60AUS

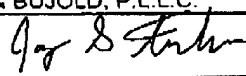
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## ENCLOSURES (check all that apply)

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|---|---|---|

REMARKS

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Jay S. Franklin DAVIS & BUJOLD, P.L.L.C.	Reg. No. 54,105 CUSTOMER NO. 020210
Signature		
Date	January 15, 2009	

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on January 15, 2009.

Signature		Date: January 15, 2009 (amp:tac)
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PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of	:	Stephen Michael KUESTER
Serial no.	:	10/554,592
Confirmation No.	:	6693
Filed	:	with an effective filing date of March 26, 2004
For	:	HIGHCHAIRS
Group Art Unit	:	3636
Examiner	:	Milton NELSON Jr.
Docket	:	COLGRA P60AUS

The Commissioner for Patents  
U.S. Patent & Trademark Office  
P. O. Box 1450  
Alexandria, VA 22313-1450

## RESPONSE

Dear Sir:

**[XXX] NO FEES ARE PAYABLE WITH RESPECT TO THIS RESPONSE.**

In response to the official action mailed October 16, 2008, please enter the following before reconsideration of this application.

**In the Specification:**

Please amend paragraphs [014] and [020] of the specification as follows in which the specification additions are shown by underlining and the specification deletions are shown by strikeout or double brackets. Please enter the replacement specification paragraphs into the record of this case.

**In the Claims:**

Please amend claim 29 as follows in which the claim additions are shown by underlining and/or the claim deletions are shown by strikeout or brackets. Please enter the amended claims into the record of this case.